


B O R O U G H

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M A L M E S B U R Y

1970

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BOROUGH OF MALMESBURY

THE

A N N U A L R E P O R T

OF THE

M E D I C A L O F F I C E R O F H E A L T H

FOR THE

YEAR ENDED

31st DECEMBER, 1970.

PUBLIC HEALTH OFFICERS OF THE AUTHORITY

MEDICAL OFFICER OF HEALTH

John R. Wray, M.R.C.S., L.R.C.P., D.P.H.

Offices: Municipal Offices,
Monkton Hill,
Chippenham.
Tel. No. Chippenham 2821.

Also: Medical Officer of Health for the
Boroughs of Calne and Chippenham,
and the Rural Districts of
Malmesbury and Calne and Chippenham.

Medical Officer, Wiltshire County Council.

School Medical Officer.

PUBLIC HEALTH INSPECTOR

H. Todd, M.A.P.H.I.

Mr. Todd in addition carries out the duties of
Borough Surveyor.

SECRETARY TO THE MEDICAL OFFICER OF HEALTH

Mrs. V.L. Gregory.

PUBLIC HEALTH COMMITTEE

The General Purposes Committee of the Council deals
with all matters pertaining to Public Health.

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The Mayor, Aldermen and Councillors of the
Malmesbury Borough Council.

Mr. Mayor, Aldermen and Councillors,

I have pleasure in presenting my Annual Report for
the year 1970.

Considering that the vital statistics are based on
a small population, and therefore liable to fluctuate from
year to year, they remain generally satisfactory. The infant
mortality rate per 1,000 live births would be calculated as
26 (compared with the rate for England and Wales of 18), but
this figure on its own is misleading, as in fact only one
death of an infant under the age of one year occurred.

The only infectious disease notified in the Borough
during 1970 was measles. There were no cases of food
poisoning, dysentery, or infectious jaundice.

During the year a report appeared in the British
Medical Journal of forty-four cases of liver fluke in persons
who had eaten wild watercress in the Forest of Dean area.
Another five cases were reported from Shropshire. After
making enquiries I found that the incidence of this disease
in cattle is rising, so assume that if nothing is done there
are likely to be more human cases in the future. As I
could find nothing in the medical literature about prevention
of this disease, I contributed an article on the subject to
the weekly journal "Medical Officer". As the subject is not
too technical I have included it as an appendix to this report.
As far as the Borough is concerned it is almost entirely
surrounded by wild watercress, and although I would stress
that this watercress has never been known to be infested with
liver fluke, the fact that the snail vector is present,
alongside farm animals that one day might be infected, does
pose a potential threat. As most people who gather
watercress do so from the Daniels's Well area, I arranged for
a warning notice-board to be placed on the pathway leading to
it.

I would like to thank the Council and its Officers
for their help and support during the year.

I am,

Your obedient servant,

JOHN R. WRAY.

Medical Officer of Health.

GENERAL STATISTICS

Area (in acres)	...	...	...	...	...	227
Population (Registrar General's estimate)	...					2,660
Number of inhabited houses at 31.12.70	...					932
Number of Council dwellings at 31.12.70	...					281
Number of applicants for Council dwellings at 31.12.70	...					96
Rateable value at 1.4.70	...	...	...	...		£91,450
Penny Rate product for 1970/71	...	...	...			£ 370

VITAL STATISTICS

BIRTH AND DEATH RATES

Birth and Death Rates as compared with other areas.
(Births and Deaths per 1,000 population standardised*)

	<u>Birth Rate:</u>		<u>Death Rate:</u>	
	<u>1969</u>	<u>1970</u>	<u>1969</u>	<u>1970</u>
Malmesbury Borough	17.5	15.4	10.4	14.9
Malmesbury R.D.C.	19.3	18.5	10.3	10.7
Wiltshire	17.6	17.2	10.7	10.7
England & Wales	16.3	16.0	11.9	11.7

* Comparability figures are supplied to each District by the Registrar General. These take into account the varying age/sex distribution of the population in different parts of the country. When applied to the local rates, they allow a more accurate comparison to be made between different areas.

STILL BIRTHS

One still birth was notified during 1970.

INFANT MORTALITY

One death of an infant under the age of one year occurred.

DEATHS

The following deaths were notified during 1970:-

<u>Males:</u>	<u>Females:</u>	<u>Total:</u>
11	31	42

Thirty-two of these deaths were in persons aged over 65, twenty being persons aged over 75.

ANALYSIS OF CAUSES OF DEATH

	<u>Males:</u>	<u>Females:</u>	<u>Total:</u>
<u>Under 4 weeks</u>			
Birth injury, difficult labour, etc.	1	-	1
<u>25 - 34 years</u>			
Benign and unspecified neoplasms	-	1	1
<u>35 - 44 years</u>			
Other malignant neoplasms	1	-	1
<u>45 - 54 years</u>			
Malignant neoplasms, breast	-	1	1
<u>55 - 64 years</u>			
Malignant neoplasm, intestine	-	1	
Malignant neoplasm, lung, bronchus	1	1	
Ischaemic heart disease	2	-	
Intestinal obstruction and hernia	-	1	
	3	3	6
<u>65 - 74 years</u>			
Malignant neoplasm, lung, bronchus	-	1	
Malignant neoplasm, breast	-	1	
Other malignant neoplasms	-	1	
Diabetes mellitus	1	-	
Ischaemic heart disease	1	4	
Cerebrovascular disease	1	1	
Bronchitis and emphysema	-	1	
	3	9	12
<u>75 years and over</u>			
Malignant neoplasm, intestine	-	1	
Diabetes mellitus	-	1	
Hypertensive disease	-	1	
Ischaemic heart disease	1	3	
Other forms of heart disease	2	3	
Cerebrovascular disease	-	3	
Other diseases of circulatory system	-	1	
Pneumonia	-	2	
Other diseases, genito-urinary system	-	1	
All other accidents	-	1	
	3	17	20
Total of all causes:	11	31	42

Like the previous year, heart disease and strokes were the main causes of death. There were three deaths from lung cancer.

INFECTIOUS AND NOTIFIABLE DISEASES

There was quite a sharp epidemic of influenza in January 1970. No figures are available, as for technical reasons it is not a notifiable disease. No deaths were reported.

The only notifiable disease reported was measles. A total of 12 cases were recorded. Immunisation against measles is available, and health visitors are encouraging mothers to bring their children to be protected in the second year of life.

A new immunisation campaign was started during the year to protect all girls at secondary school against Rubella (sometimes called "German Measles"). This is a mild disease, but if contracted during the early months of pregnancy it can damage the foetus so that if the child is born alive it is found to have congenital defects such as deafness, blindness or a deformed heart. When it is known that the mother has been in contact with rubella in pregnancy she can be given a protective serum; however, it may not always be known that she has contracted the disease, so it is far safer to give long-lasting protection in adolescence.

I am indebted to Dr. C.D.L. Lycett, the County Medical Officer of Health, for the following immunisation statistics carried out in the Borough during 1970:-

Year of Birth:		1970	1969	1968	1967	1966	1961 - 65	1955 - 60	Others under 16
Primary imms. completed during 1970	Diph.	26	31	1	-	1	-	-	-
	Wh. cough	26	31	1	-	1	-	-	-
	Tetanus	26	31	1	-	3	1	-	-
	Measles	-	41	22	8	7	5	2	-
	Polio	26	31	2	1	2	4	-	-
Reinforcing imms. given in 1970	Diph.	-	9	22	4	21	34	2	-
	Wh. cough	-	9	19	4	-	2	-	-
	Tetanus	-	9	22	4	21	35	2	-
	Polio	-	8	22	4	20	45	3	-

SMALLPOX

Age Group:	Months				Years		
	0 - 3	3 - 6	6 - 9	9 - 12	1	2 - 4	5 - 15
Vaccinations	-	-	-	-	6	7	3
Re-vaccinations	-	-	-	-	-	-	-

HOSPITAL STATISTICS

I am grateful to the Mid-Wilts. Hospital Management Committee for the following statistics for Malmesbury Hospital during 1970:-

MALMESBURY HOSPITAL

<u>BEDS</u>	Number of beds	...	...	...	30
	Average daily number of beds occupied	...	...	...	20.73
	Average duration of stay in days: Acute	...	...	...	13.45
	Maternity	...	...	...	7.46
	Highest daily occupation during year	...	...	...	29
	Lowest daily occupation during year	...	...	...	13
	Total patient days for year	...	...	...	7565
<u>IN-PATIENTS</u>	Total admissions	...	...	...	668
	Total discharges (including deaths)	...	...	...	675
	Deaths	...	...	...	40
<u>MATERNITY</u>	Number of cots	...	...	...	10
	Live births	...	...	...	173
	Still births	...	...	...	-
	Neonatal deaths	...	...	...	-
	Maternal deaths	...	...	...	-
	Number of infants wholly breast-fed on discharge	...	...	...	63
	Patient days for year of infants in maternity wards	...	...	...	1366
<u>OPERATIONS</u> (including out-patients)	Major	...	...	...	5
	Intermediate	...	...	...	42
	Minor	...	...	...	450
	Total:				497
<u>X-RAY</u>	New out-patients	...	...	...	938
	Attendances: Out-patients	...	...	...	1064
	In-patients	...	...	...	70
<u>PHYSIOTHERAPY</u>					
		New out-patients			510
		New in-patients			117
	Individual	Attendances:			
	Treatment	Out-patients			5147
		In-patients			821
		New out-patients			59
		New in-patients			177
	Group	Attendances:			
	Exercises	Out-patients			223
		In-patients			699

MALMESBURY HOSPITAL

IN-PATIENT ANALYSIS

				Average Daily Number of Occupied Beds
General Surgery	...	...	...	1.52
Trau. and Orthopaedic	...	...	...	1.01
Gynaecology	...	...	...	0.92
General Practice Units:				
Maternity	...	...	...	4.09
Other Medical	...	...	...	12.75
Private Beds (S.1.)	...	...	...	0.02
(S.4.)	...	...	...	0.42
Total:				<u>20.73</u>

OUT-PATIENT ANALYSIS

	New Patients	Attendances	No. of Clinics
General Medicine	89	232	25
Paediatrics	36	104	12
Dermatology	39	97	12
Neurology	56	120	12
General Surgery	209	393	28
E.N.T.	127	234	14
Trau. and Orthopaedic	231	676	43
Ophthalmology	63	204	21
Gynaecology	112	187	14
TOTAL CONSULTANTS' CLINICS	962	2247	181
CASUALTY DEPARTMENT	2901	4730	-
G.P. ANTE-NATAL CLINICS	207	1146	135

WATER SUPPLIES

I am indebted to Mr. C.R. Phillips, Engineer to the North Wilts. Water Board, for the following information:-

The water supplies of the area of this Board have been satisfactory in quality and quantity.

Regular supervision of the quality of the water supplied is exercised by submitting, generally on a weekly basis, samples for bacteriological examination. During the year under review 1,512 samples from consumers' points of supply were examined; 1,428 were satisfactory for coli. counts of less than 1; 43 were reported to have coli. counts of 1 - 2; and 41 counts of 3 or more.

On the occasions when reports of coli. counts are received from the laboratory, investigations and repeated samplings are undertaken and continued until satisfactory reports are received.

Similar supervisory examinations are regularly carried out by sampling the untreated waters of the Board's sources, and the results obtained in the year under review are as follows:-

594 samples from raw water supplies were submitted:-

Excellent: coli. count of less than 1	...	...	455
Satisfactory: coli. count of 1 - 3	...	...	76
Suspicious: coli. count of 4 - 10	...	...	34
Unsatisfactory: coli. count of more than 10	...	...	29
			<u>594</u>

Samples excellent and satisfactory - 89.4%.

Chlorination of all sources is practised with the aim of obtaining chlorine residuals at all consumers' points of supplies of between 0.1 and 0.3 p.p.m.

The Board continues to exercise supervision of the quality of raw water from all the sources by submitting samples to their Consultant Chemists, the Counties Public Health Laboratories, London, and any changes in chemical or mineralogical qualities of the water are reported upon by Mr. Gordon Miles, the principal of those laboratories.

Fluoride occurs naturally in quantities from 0.8 to 0.4 p.p.m. in the water obtained from the deep borehole sources in the limestone, but it is usually absent in the waters obtained from shallow wells and spring sources.

The Board is advised by its Consultant Chemists that all the waters supplied are not plumbo-solvent.

The Board continues to make provision for increases in demand for water by seeking additional sources, and this work is being done in close co-operation with the River Authorities, whose statutory areas extend through the Board's area of supply.

SEWAGE DISPOSAL

The newly modernised and enlarged Sewage Disposal Works are functioning satisfactorily. The sludge drying plant is particularly useful.

HOUSING

There was an increase in the number of grants paid by the Council for modernising housing from 6 in 1969 to 14 in 1970.

OTHER PUBLIC HEALTH MATTERS

These are presented in the attached report of the Public Health Inspector.

APPENDIX

There follows my article which was published in the weekly medical journal "Medical Officer" (now named "Community Medicine") on 7th May, 1971.

PREVENTION OF HUMAN FASCIOLIASIS

This paper suggests some practical ways to prevent the occurrence of human fascioliasis from eating infested wild watercress.

Ashton et al. (1970) reported 5 cases of human fascioliasis in Shropshire, and Harman et al. (1970) 44 cases in Monmouthshire/Gloucestershire. In both outbreaks the infestation was traced to wild watercress. In previous years cases have been reported from Hampshire, Kent and Scotland.

Cultivated watercress can be protected quite easily if the recommendations of the Working Party of the Public Health Laboratory Service on the Hygienic Production of Watercress (1966) are implemented. The main barriers to contamination of cultivated watercress beds are:-
(a) properly constructed beds; (b) an adequate and uncontaminated water supply; and (c) prevention, by means of adequate fencing, of access of cattle and sheep to the beds.

However, I should like to warn medical officers of health to check that these measures are being carried out, because the latest edition (1968) of the Ministry of Agriculture booklet on "Watercress Growing" does not mention the danger of liver fluke anywhere in its 35 pages.

Wild watercress is in many areas impossible to protect from infestation, but even so there are measures that can be taken to protect the public. Before discussing these it is necessary to consider some facts about the parasite and the ecology of the intermediate host.

Fasciola hepatica was named by Linnaeus in 1758. It is a trematode which is a parasite of cattle, sheep, and rabbits and has a world-wide distribution. The infected animal passes the egg in its faeces; this develops into a miracidium, which must find the intermediate host, the freshwater snail *Lymnaea truncatula*, for the life cycle to continue. The miracidium can travel up to two yards in moist conditions. In the snail it develops over a period of about two months and emerges in the form of free-living cercariae, which travel onto grass or waterside plants, where they encyst, surrounding themselves with a tough protective coat. If eaten by a mammalian host the immature fluke migrates through the intestinal wall to the liver. After growing in the liver tissue for some six weeks it settles in the biliary passages where four weeks later it becomes mature. The adult fluke can lay 20,000 eggs a day and a severely infected

animal can contaminate the ground with up to six million eggs a day.

The snail *Lymnaea truncatula* is about $\frac{1}{4}$ inch long, and only multiplies in moist conditions. Mozley (1957) lists areas in which it is common as hoof prints near drinking places, on the banks of streams, along paths, especially where they cross streams, near springs, and along the course of seepages, also road-side ditches and any shallow depression in a pasture that is badly drained.

The snail is not usually found in clear running water, and watercress in this area is likely to be safe. However, I have found from my surveys that wild watercress spreads from the centre of streams to cover marshy areas near the banks, and I have found the snail in cattle hoof prints with watercress growing right alongside. It is these areas where the habitat of the snail and the marginal habitat of the watercress overlap that are potentially dangerous if cattle and sheep are present.

I am grateful to Dr. C.B. Ollerenshaw, Central Veterinary Laboratory, Weybridge, (personal communication) for the following information.

The greatest danger of infection is in autumn and winter. Fluke eggs hatching in June develop in the snail during July and August, and the cercariae emerge onto the herbage in September and October. In occasional years there is a danger of infection of herbage in early summer from snails infected in late summer and autumn of the previous year. There is no development of fluke eggs or of the infection and emergence of the parasite from the snail in temperatures below 10°C (50°F). This means that the fluke is "active" from May to October. Moisture is important to all stages of the parasite as well as to the snail, and, since moisture conditions vary enormously in habitats and are largely dependent on rainfall, it follows that one tends to get a high incidence of disease in wet summers and vice versa.

Once herbage (or watercress) is infected with the metacercariae then the infection persists for several months in winter (80% of metacercariae encysting in September will still be alive at the end of December) and several weeks in summer. Viable metacercariae on herbage have been recorded over a period of 51 weeks. There is no truth in any country lore that there are certain periods when it is safe to eat watercress, although it would be much safer to eat it in May, June and July, rather than in the autumn and early winter. Some farmers believe that frost kills off the metacercariae on herbage, but there is no truth in this. Temperature governs the development and emergence of the parasite from the snail, but once the herbage is infected then temperature has little immediate effect on viability.

Whilst washing of watercress will undoubtedly wash a few cysts off the herbage, it will not wash them all off. A standard technique when estimating the degree of herbage infection is to detach the cysts by washing the herbage in a liquidizer. This is very vigorous agitation and does not leave watercress in an acceptable condition for eating. The cyst wall is very resistant. Metacercariae in cysts will survive immersion in formalin for some little time and Dr. Ollerenshaw doubts whether there is any prospect of eliminating cysts once the watercress is infected.

Blamire et al. (1970) report that fascioliasis is the most common disease of cattle found at meat inspection. They state that over 700,000 bovine livers a year, worth over £1m.,

are condemned in British slaughterhouses, and that the incidence is tending to rise. Figures from a local slaughterhouse for 1969 showed that 27% of cattle were infested with fascioliasis.

Since sheep die more readily of the disease than cattle, farmers tend to dose their sheep more frequently to try and control the disease. In cattle it is a milder disease, and may not be detected until slaughter - at which time it is the butcher who bears the loss and not the farmer.

Because the farmer may not know that his cattle have fascioliasis, any area of wild watercress to which cattle have access, and where the snail *Lymnaea truncatula* is present, should be regarded as potentially dangerous. For this reason I consider that the first step in prevention is for the District Medical Officer of Health to survey all areas of wild watercress in his district. In my area I was surprised to find that it was present in so many places. The information can be obtained from health inspectors and councillors. In these days of specialization I suppose it would be possible to call in an expert to look for the snail, but in my case the prospect of some pleasant country walks was inviting, so, armed with a pair of gum boots and a plastic bag in which to put the snails, I set off to investigate. I had no difficulty in finding snails in muddy hoof prints and on banks near watercress. They are very small, so good eyesight and some patience is required. An excellent book with good illustrations of the snail is "Liver Fluke Snails in Britain" by Alan Mozley, published by H.K. Lewis & Co., London. The snails were sent to the Zoology Department of Bristol University for identification, but this can also be arranged by the local Public Health Laboratory. Snails are most plentiful in summer and autumn, so this is possibly the best time of year for a survey. In winter they go into hibernation until March or early April.

The first beneficial effect of a survey is that on reporting to the local council areas of wild watercress considered to be potentially dangerous, the local press will take up the story and give it publicity. At the same time they should be informed that cultivated watercress sold in the shops is perfectly safe to eat. In this area the subject was also reported on the local television and radio news services. It is worth repeating (Communicable Disease Report 69/25) that in 1969 a resident of Wiltshire, who had eaten some infested watercress on a visit to Gloucestershire in 1968, saw a television programme on which the outbreak in Gloucestershire was being discussed, and was able to diagnose his illness.

In two areas in which I found the snail *Lymnaea truncatula* in cattle hoof prints next to wild watercress, I learned later from councillors that, in previous years, not only was this watercress eaten by some people locally, but that it was gathered and sold in small grocers' shops. Health inspectors should, therefore, visit shops and check that they only buy cultivated watercress from approved sources. It is a mistake to think that wild watercress must be poor in quality; I have found it wild in two places where it was as lush and large-leaved as the cultivated variety.

Apart from publicity and warning local shop-keepers, it is possible to consider further measures to protect the uninformed members of the public.

The survey will have revealed the following categories of watercress:-

- (1) Watercress unable to be infested, either because the habitat is unsuitable for the snail, or because the area is protected from live-stock.

- (2) Watercress where the snail is present, but arrangements can be made for fencing off live-stock.
- (3) Watercress where both the snail and live-stock are present together.

With regard to the last two categories, no action can be taken without the full agreement of the landowner. In most cases this will be a farmer, and he will be most concerned with the health of his live-stock. It is useful to obtain two free leaflets to give him, which give a complete account of liver fluke and how it can be controlled. They are Shellstar Agricultural leaflet F.2 and Frescon is No Fluke obtainable from Shellstar Ltd., Ince Marshes, Ince, Chester CH2 4LB. This company sell a new molluscicide, "Frescon", which is harmless to live-stock. The Ministry of Agriculture have an Advisory Leaflet No. 310 which can be purchased from HMSO, which gives full information about the disease, but the leaflet was published in 1966 and the chemicals recommended are toxic to live-stock.

As I did not wish to appear to be advocating the product of only one company, I enquired from the Pesticides Branch of the Ministry of Agriculture whether any other firm markets a product similar to "Frescon" and was informed that none does. There are other molluscicides available, such as Metaldehyde (Murphy Chemical Co., Boots, May & Baker Ltd.) and Methiocarb (Baywood Co., Boots, Pan. Britannica Co.), but both of these are of higher toxicity.

If the farmer is concerned about liver fluke in his stock he might either use a molluscicide, or in suitable cases fence off the stream if he is persuaded that this could be a danger spot for his live-stock.

District councils are used to buying chemicals to kill rats and mice, and disinfectants and insecticides for use in homes and on rubbish tips. These chemicals are all used to control vectors of disease, so they might be persuaded to buy a molluscicide or herbicide in suitable circumstances. However, the views of the Pollution Officer of the local River Authority must be taken into account. In this area the Pollution Officer has no objection to spraying "Frescon" on land, but is not keen on its being sprayed near the water's edge as it is toxic to fish. He would, however, approve the use of "Aquacide", an officially approved Chipman Chemical Company formulation of diquat, for killing off the wild watercress. This would be preferable to removing the watercress by hand, for which labour is unlikely to be available. If either "Frescon" or "Aquacide" is considered for use, the consent of the owner of the land must first be obtained.

Probably the simplest answer in areas which the public frequent is to get the Council to agree to the erection of a notice-board - "Warning: Wild watercress may become infected with liver fluke". In all cases the permission of the interested farmers must be obtained. Another suggested wording for a notice-board is - "Warning: Wild watercress should not be collected from this area". My objection to this is that, like the notice "Keep off the grass", it may not only be ignored, but may draw attention to the watercress and actually provoke some people to gather it.

Although it may be impracticable to get prior permission from the dozens of landowners who may be involved when doing the initial surveys of areas of wild watercress, if a place is discovered that seems potentially dangerous to the public, and action is considered, such as informing the council (and thereby the press), it is courteous and politic to find out who the landowner is, and telephone to ask his permission to enter on his

land. He is then more likely to be co-operative if further action such as the erection of a warning notice-board, is considered necessary.

In the case of a notice-board the farmer should be asked to advise on the wording, as it is not the intention to advertise that the farm is "flukey" and his animals diseased. This might affect the prices of animals sold off the farm, and also the price or rent of the farm should it change hands. The farmer should be told about this possibility so that he can give this matter due thought. However, I have so far found farmers agreeable to the wording warning about liver fluke.

Finally, the Conchological Society of Great Britain and Ireland have members throughout the country who, I am sure, would be willing to help on anything to do with snails; in order to obtain the address of members living locally I suggest contacting the Secretary, Miss J. Sawyer, 58, Teignmouth Road, London, NW2.

References:

- Ashton, W.L.G., Boardman, P.L., D'Sa, C.J., Everall, P.H. and Houghton, A.W.J. (1970). Brit. Med. J., 3, 501.
- Blamire, R.V., Crowley, A.J. and Goodhand, R.H., (1970). Vet. Rec. 87, 234.
- Hardman, E.W., Jones, R.L.H. and Davies, A.H. (1970). Brit. Med. J. 3, 502.
- Public Health Laboratory Service (1966). Mon. Bull. Min. Hlth. Lab. Serv., 25, 146.
- Ministry of Agriculture, Fisheries and Food, "Watercress Growing", Bulletin 136. (1967 edition, reprinted with minor corrections 1968) HMSO, London.
- Ministry of Agriculture, Fisheries and Food (1966). "Fluke or Liver Rot in Sheep". Advisory Leaflet 310. HMSO, London.
- Mozley, A., (1957). "Liver Fluke Snails in Britain". H.K. Lewis & Co., London.

The Mayor, Aldermen and Councillors of the
Malmesbury Borough Council.

Gentlemen,

I have the honour to present the Public Health Inspector's section of this report, and in so doing take the opportunity to place on record my appreciation of the advice and assistance extended to me by Dr. Wray and other Officers of the Council.

WATER SUPPLY

The water supply remained satisfactory in all respects but its degree of hardness, which is still a source of expense to consumers.

Population served	...	...	...	...	2,700
No. supplied direct to houses	...	...	...	...	2,646
No. supplied by standpipe	...	...	...	...	54
Fluoride content	...	...	...	...	less than 0.1 p.p.m.

SEWAGE DISPOSAL

The extensions to the sewage works were completed during the year, except for minor works, and the standard of effluent has steadily improved.

The works consisted of increased settlement capacity, biological filtration and additional filtration with a completely new system of sludge drying consisting of a vacuum operated filter, which eased the problem of sludge disposal, but owing to the amount of labour required to maintain and operate it, plus the cost of chemicals, etc., it appears to be a space saver rather than a cost reducer. In view of the increased load on the works from the adjoining Rural Area it was essential to use a system of sludge drying which did not make undue demands on the available space at the works.

When the new plant came into operation and the effect of the additional load from the North Eastern Area of the Rural District slowly increased during the year, it became apparent that additional labour was needed to operate the plant, although in the early stages this could be met by the existing staff extending their hours of work.

The sewerage system gave little trouble during the year except for minor blockages but the main storm pumps do give some cause for concern due to the solid matter, which gives offence to the eye rather than being a health hazard, due to retention on the river-bed at the point of discharge.

COMMON LODGING HOUSES

There are no common lodging houses in the Borough.

FOOD & DRUGS ACT, 1955

No samples of heat treated milk were taken during the year as they are taken from the same sources regularly in the adjoining district.

No raw milk is distributed in the district.

Regular inspections of food premises are not possible at present staff levels and only occur incidental to other inspections.

FOOD HYGIENE REGULATIONS, 1960

<u>Type of Shop</u>				<u>No.</u>	<u>No.</u>	<u>No.</u>	<u>No.</u>
					<u>Inspected</u>	<u>Unsatisfactory</u>	<u>Improved</u>
Grocers	...	...	...	11	4	-	-
Butchers	...	...	...	5	8	-	-
Greengrocers	...	...	...	2	2	-	-
Cafes and Restaurants	...	...	...	4	2	-	-
Hotels	...	...	...	5	2	1	1
Public Houses	...	...	...	4	4	1	1
Off Licences	...	...	...	2	1	-	-
Bread and Cake Shops	...	...	...	2	1	-	-
Wet Fish Shop	...	...	...	1	1	-	-
Sweet Shops	...	...	...	4	1	1	1
Fish and Chip Shops	...	...	...	2	1	1	-

POULTRY INSPECTION

There are no premises of this type in the Borough.

MEAT INSPECTION REGULATIONS, 1963

Meat inspection is carried out at one private slaughterhouse up to the 100% standard. A local partnership of Veterinary Surgeons ~~undertake partnership of Veterinary Surgeons~~ undertake part of this work and I am pleased to place on record my appreciation of the work they do.

The slaughterhouse premises remain basically the same as in previous years.

				<u>Beasts</u>	<u>Calves</u>	<u>Sheep</u>	<u>Pigs</u>
Inspected by Veterinary Surgeons	...	...	...	1168	65	753	2199
Inspected by Public Health Inspector	...	...	...	1300	141	738	2166
Total:				2468	206	1491	4365
Carcases condemned	...	...	...	4	3	-	8
% animals affected	...	...	...	0.162	1.46	-	0.186
Parts condemned	...	...	...	514	24	15	569
% animals affected	...	...	...	20.8	11.67	1.05	13.03
Parts condemned for T.B.	...	...	...	-	-	-	32
% animals affected	...	...	...	-	-	-	.767
Parts condemned for C.B.	...	...	...	13	-	-	-
% animals affected	...	...	...	0.585	-	-	-
Carcases refrigerated	...	...	...	-	-	-	-

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Two shops received general inspections during the year. One accident was reported and investigated.

CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT, 1960

There is one site for 12 residential caravans which continues to improve in appearance and amenities.

REFUSE COLLECTION AND DISPOSAL

The new refuse vehicle came into operation during the year and showed an immediate saving on travelling time to the tip and a reduction of crew from 4 to 3 men. The number of refuse collection days remained the same however, and the volume of refuse continued to grow.

FACTORIES ACT, 1961

I summarise below the details requested in Circular 1/69.

1. Inspections for purposes of provisions as to health (including inspections made by Public Health Inspectors).

<u>Premises</u>	<u>No. on Register</u>	<u>No. of Insp's</u>	<u>No. of Written Notices</u>	<u>No. of Occupiers Prosecuted</u>
1. Factories in which Sections 3, 4 and 6 are to be enforced by Local Authorities	-	-	-	-
2. Factories not included in 1. in which Sect. 7 is enforced by the Local Authority	18	5	-	-
3. Other premises in which Sect. 7 is enforced by the Local Authority (excluding out-workers' premises)	-	-	-	-
Total:	18	5	-	-

2. Cases in which DEFECTS were found.
(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases").

<u>Particulars</u>	<u>Found</u>	<u>Remedied</u>	<u>Referred</u>		<u>No. of cases in</u>
			<u>To H.M.</u>	<u>By H.M.</u>	<u>which prosecutions</u>
			<u>Insptr.</u>	<u>Insptr.</u>	<u>were instituted.</u>
(1)	(2)	(3)	(4)	(5)	(6)
Want of cleanliness (S.1)	-	-	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable Temperature (S.3)	-	-	-	-	-
Inadequate Ventilation (S.4)	-	-	-	-	-

<u>Particulars</u>	<u>Found</u>	<u>Remedied</u>	<u>Referred</u>		<u>No. of cases in which prosecutions were instituted</u>
			<u>To H.M. Insptr.</u>	<u>By H.M. Insptr.</u>	
(1)	(2)	(3)	(4)	(5)	(6)
Ineffective drainage of Floors (S.6)	-	-	-	-	-
Sanitary Conveniences (S.7)					
(a) Insufficient	-	-	-	-	-
(b) Unsuitable or defective	2	2	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not incl. offences relating to Outwork)	-	-	-	-	-
Total:	2	2	-	-	-

There are no Outworkers registered in this district.

This item concludes my section of this Annual Report.

I am,

Your obedient servant,

H. TODD.

Public Health Inspector.

